

HHSC CONTRACT NO. 529-16-0102-00053-A
AMENDMENT NO. 1
FAMILY PLANNING GRANT PROGRAM

The Health and Human Services Commission ("HHSC" or "System Agency") and The Heidi Group ("Contractor" or "Grantee"), having its principal office at 109 S. Harris Street, Ste. 210, Round Rock, Texas 78664 (each a "Party" and collectively the "Parties") desire to amend the Family Planning Grant Program contract ("Contract") with the terms and conditions contained herein ("Amendment").

WHEREAS, the Parties desire to modify Contract Section IV. STATEMENT OF SERVICES TO BE PROVIDED as described herein; and

WHEREAS, the Parties desire to modify Contract Section V. CONTRACT NOT-TO-EXCEED AMOUNT AND PAYMENT PROCESSES by reducing the total amount of funds in the Contract.

NOW, THEREFORE, the Parties hereby amend and modify the Contract as follows:

1. **SECTION IV** of the Contract, STATEMENT OF SERVICES TO BE PROVIDED, is hereby modified as follows:

- A. The following forms are added to Attachment B -- Contractor's revised Program Forms:

Form A: Face Page;

Form A-1: Narrative;

Form D: Contact Information; and

Form E: Funding Request & Proposed Number of Unduplicated Clients

- B. The forms in subparagraph 1A, above, are attached hereto and incorporated herein by this reference and supersede the corresponding forms contained in either Attachment B of the Contract or Attachment D of the Contract. All program forms contained in either Attachment B or Attachment D of the Contract that are not modified in this Amendment will continue in full force and effect throughout the term of the Contract.

- C. The last sentence of Section IV is deleted in its entirety and replaced with the following language:

The Contractor's number of Unduplicated Clients to be served under the Contract is hereby reduced by 14,397. The Contractor shall provide Family Planning Program services to 3,498 Unduplicated Clients during the term of the Contract.

2. **SECTION V** of the Contract, CONTRACT NOT-TO-EXCEED AMOUNT AND PAYMENT PROCESSES, is hereby deleted in its entirety and replaced with the following language:

- A. The Contract not-to-exceed amount is hereby reduced by \$4,103,070. The new not-to-exceed amount of the Contract is \$996,930 as described in the budget documents

contained in Forms F et seq., which are attached hereto and incorporated herein by this reference. The budget documents incorporated into this Amendment hereby replace the budget documents contained in the Attachment C of the Contract.

B. Fee-For-Service Payments:

The Contract not-to-exceed amount for the Fee-For-Service component of the Contract is hereby reduced by \$2,050,000. The new not-to-exceed amount for the Fee-For-Service component of the Contract is \$500,000. Contractor must submit claims in accordance with the requirements of Section 2.3.3 and 2.3.5 of the Family Planning Program Open Enrollment, ATTACHMENT A of the Contract.

C. Cost Reimbursement Payments:

The Contract not-to-exceed amount for the Cost Reimbursement component of the Contract is hereby reduced by \$2,053,070. The new not-to-exceed amount for the Cost Reimbursement component of the Contract is \$496,930. All expenditures under the Contract must be in accordance with the budget forms incorporated into this Amendment. This portion of the Contract will be paid on a cost reimbursement basis as described in Sections 2.3.3 and 2.3.4 of the Family Planning Program Open Enrollment, ATTACHMENT A of the Contract.

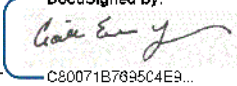
D. This Contract is contingent upon the continued availability of funding. If funds become unavailable during the term of the Contract, the System Agency may terminate this Contract without penalty.

3. This Amendment shall be effective will be effective upon the signature date of the latter of the Parties to sign the Amendment.
4. Except as amended and modified by this Amendment, all terms and conditions of the Contract, as amended, shall remain in full force and effect.
5. Any further revisions to the Contract shall be by written agreement of the Parties.

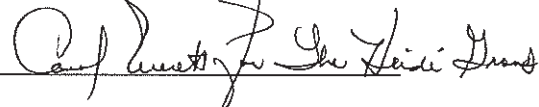
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6. The Parties have executed this Amendment in their capacities as stated below with authority to bind their organizations on the dates set forth by their signatures.

SYSTEM AGENCY


Cecile Erwin Young
Chief Deputy Executive Commissioner

GRANTEE

By: 

Name: Carol Everett

Title: CEO

Date of Execution: 8/11/2017 | 9:44 AM CDT

Date of Execution: August 8, 2017

THE FOLLOWING ATTACHMENTS ARE ATTACHED HERETO AND INCORPORATED HEREIN BY REFERENCE:

ATTACHMENT B – CONTRACTOR'S REVISED PROGRAM FORMS

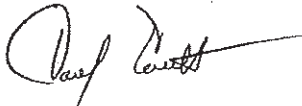
- **FORM A: FACE PAGE**
- **FORM A-1: NARRATIVE**
- **FORM D: CONTACT INFORMATION**
- **FORM E: FUNDING REQUEST & PROPOSED NUMBER OF UNDUPLICATED CLIENTS**

ATTACHMENT C – CONTRACTOR'S BUDGET DOCUMENTS

Attachment B – Contractor's Revised Program Forms

Texas Health and Human Services Commission – Family Planning FY17 Open Enrollment
FORM A: FACE PAGE – REVISED 7/28/17

*This form requests basic information about the Applicant and project, including the signature of the authorized representative.
The face page must be completed in its entirety.*

APPLICANT INFORMATION	
1) LEGAL BUSINESS NAME: The Heidi Group	
2) MAILING Address Information (Include mailing address, street, city, county, state and zip code): PO Box 2050, Round Rock, Williamson County, TX 78680	
3) PAYEE Name and Mailing Address (if different from above): same	
4) DUNS Number (9-digit): 006811959	5) Health and Human Service Region: 7
6) Federal Tax ID No. (9 digit), State of Texas Comptroller Vendor ID No. (14 digit) or Social Security Number (9 digit): 74-2757919	
<i>*The Applicant acknowledges, understands and agrees that the Applicant's choice to use a social security number as the vendor identification number for the contract, may result in the social security number being made public via state open records requests.</i>	
7) TYPE OF ENTITY (check all that apply):	
<input type="checkbox"/> City <input type="checkbox"/> County <input type="checkbox"/> Other Political Subdivision <input type="checkbox"/> State Agency <input type="checkbox"/> Indian Tribe <input checked="" type="checkbox"/> Nonprofit Organization* <input type="checkbox"/> For Profit Organization* <input type="checkbox"/> HUB Certified <input type="checkbox"/> Community-Based Organization <input type="checkbox"/> Minority Organization <input type="checkbox"/> Faith Based (Nonprofit Org) <input type="checkbox"/> Individual <input type="checkbox"/> Federally Qualified Health Centers <input type="checkbox"/> State Controlled Institution of Higher Learning <input type="checkbox"/> Hospital <input type="checkbox"/> Private <input type="checkbox"/> Other (specify):	
<i>*If incorporated, provide 10-digit charter number assigned by Secretary of State: 1339826-01</i>	
8) BUDGET PERIOD: Start Date: July 1, 2016 End Date: August 31, 2017	
9) COUNTIES SERVED BY FAMILY PLANNING PROJECT: (complete Form C: Texas Counties and Regions multiple, see list)	
10) PRIMARY PLACE OF SERVICES PROVIDED: Throughout Texas	
11) TOTAL FUNDING REQUESTED: \$996,930	13) FAMILY PLANNING (FP) PRIMARY CONTACT PERSON
Fee for Service: \$500,000 Categorical: \$496,930	Name: Carol Everett Phone: 512-255-2088 Fax: 512-255-2582 Email: ce@heidigroup.org
12) PROJECTED EXPENDITURES	14) FINANCIAL OFFICER
Does Applicant's projected federal expenditures exceed \$500,000, or its projected state expenditures exceed \$500,000, for Applicant's <u>current fiscal year</u> (excluding amount requested in line 9 above)? ** Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> <i>**Projected expenditures should include anticipated expenditures under all federal grants including "pass through" federal funds from all state agencies, or all anticipated expenditures under state grants, as applicable.</i>	Name: J. Dwayne Anderson Phone: 512-481-9506 Fax: 512-692-2783 Email: jdanderson@jdacpa1.com
The facts affirmed by me in this proposal are truthful and I warrant the Applicant is in compliance with the assurances and certifications contained in APPENDIX I: HHSC Assurances and Certifications. I understand the truthfulness of the facts affirmed herein and the continuing compliance with these requirements are conditions precedent to the award of a contract. This document has been duly authorized by the governing body of the Applicant and I (the person signing below) am authorized to represent the Applicant.	
15) AUTHORIZED REPRESENTATIVE	16) SIGNATURE OF AUTHORIZED REPRESENTATIVE
Name: Carol Everett Title: CEO Phone: 512-255-2088 Fax: 512-255-2582 Email: ce@heidigroup.org	
	17) DATE 7/28/2017

Form A-1 -- APPLICATION NARRATIVE

1. Provide the job descriptions (including specific duties) for the following key employees in the space provided:

➤ Quality Assurance/Quality Improvement personnel:

Assists Medical Director and Program Clinical Director in defining and creating provider protocols, policies, and procedures, for The Heidi Group (THG) as well as for provider. Trains providers in THG goals, processes, actions, staff functions, adverse event reporting and correction, patient response, performance and outcome measures. Reviews provider protocols and standing order delegation. Attends state trainings.

Addresses, monitors, and, if necessary, corrects procedures to ensure subcontractor providers meet the highest possible standards. Assists in scheduling onsite in-service trainings. Trains in processes for identifying performance and outcome measures. Also trains in assessing patient satisfaction, office skills, risk management, strengthening management capacity, and systems monitoring and evaluation.

Monitors providers' monthly Quality Assurance meetings and collects reports, works on corrective plans if needed. Promotes communication among team members to discuss possible improvements. Interacts with each provider's QA committee to determine areas of strength, service, and weakness through monthly conference calls, email assessments, and personal phone calls. Performs quarterly onsite audits with additional training as necessary.

Monitors monthly reports for provider assessments and billing. Must have two years' medical office or hospital experience.

➤ Eligibility Staff:

Assists clinics with interviewing patients to determine if patient is currently enrolled in or eligible for other programs that automatically qualify a patient for Healthy Texas Women or Family Planning Program. Reviews and screens patient registration and documents prior to medical care. Assesses income, assets, and residency documents. Assists with data entry and determination of program eligibility. Teaches The Heidi Group billing staff how to assess eligibility. Participates in provider training. Remains available to providers for immediate assistance with eligibility questions. If fraud or false statements are suspected, immediately reports to Chief Financial Officer or Executive Director.

Participates in in-service and continuing education opportunities. Maintains strict confidentiality in accordance with all HIPAA guidelines and regulations. Conducts self in accordance with all THG employee policies and laws. Performs daily backups of data.

Must have two years' eligibility assessment experience. Must have familiarity with state programs patients might utilize. Knowledge of computer programs, office procedures, medical coding, and eligibility requirements of programs, as well as services offered. Bilingual preferred.

➤ Data Collection Staff:

Manages two types of data: (1) Trains provider staff to collect patient data, and (2) Collects data on The Heidi Group's contracted providers.

(1.) Trains provider staff to collect proper data for patient registration forms, proof of residency documents, proof of income, and proof of enrollment in other programs that might pre-qualify a patient for Healthy Texas Women or Family Planning Program. Trains staff to: clean the data and assemble in order; analyze data, filter, sort, and assess potential patient's qualifications; assemble charts appropriate for physicians, documentation, and filing. Presents charts to Eligibility Specialist for assessment of eligibility.

(2.) Collects monthly reports from providers to analyze progress of Family Planning and Healthy Texas Women Programs for THG reports. Compiles and submits required contractor reports to the state on behalf of THG. Tracks number of patients billed for both Family Planning and HTW Programs. Reviews copies of electronic billing records for THG statistical data collection. Reviews any adverse reports and submits for corrective action.

Must have two years' experience in medical office or hospital billing.

➤ Billing Staff:

Responsible for training provider staff in confirming proper coding for patient charges based on treatment information, diagnoses, and related procedures. Submits THG and providers' claims electronically, posts and manages account payments. Ensures providers are being reimbursed for all procedures. Maintains records of medical bills, claims, and settlements, and patient billing complaints, if any. Resolves patient billing questions. Investigates denied claims and resubmits when appropriate. Ensures all accounts are paid in full.

Trains provider staff to post payments and deliver to appropriate party for deposits. Trains provider staff to submit weekly reports to executive director. Assists with writing protocols for providers' billing staff. Trains providers' billing staff in coding and billing procedures for state programs. Remains accessible to providers for questions and assistance.

Maintains strict confidentiality. Performs daily backups of all data. Understanding of medical coding systems required. Adheres to federal, state, and local laws, and HIPAA guidelines. Excellent computer skills, ability to operate basic office equipment, able to work with a broad cross section of people.

Must have two years' billing experience in medical office or hospital.

2. In the space provided, Applicant must provide a summary of how it will ensure compliance with the Program Requirements contained in Section 2 of this open enrollment:

The Heidi Group (THG) will comply with all program requirements by working with a network of small clinics and providers across the state that provide core family services to the target Family Planning Program population. None of these providers perform or promote elective abortions. Most provide the optional services as well.

THG will provide the following services to subcontractors: administrative support; billing assistance; training on the Family Planning and Healthy Texas Women Programs; education about other state health programs for low-income clients; training on screening for eligibility and how to assess all programs clients are eligible for; community outreach strategies to help clinics recruit and enroll more patients; provision of written materials for use in office and community; creation of standard manuals; regular audits and site inspections of all subcontractors.

THG will perform an initial on-site inspection of each clinic to ensure all sites meet the readiness criteria.

Clinics that do not have a Class D pharmacy are in the process of applying, or have entered into a memo of understanding with a referral pharmacy under the guidelines set forth in the state Family Planning Policy Manual.

To ensure subcontractors are aware of and in compliance with all program requirements, THG will conduct an initial two-day on-site training for subcontractor staff, as well as additional training and site inspections on an ongoing basis. Providers will have immediate access to THG staff through 800 numbers, cell phone numbers, email, and texts.

THG and all THG providers have Medical Directors with a valid and current Texas medical license for each provider location to oversee Family Planning Services. THG providers and each clinic site will have a billing system to submit Fee-For-Service claims to the Texas Medicaid Healthcare Partnership. Subcontractors will use a designated TPI number assigned to THG for use only with this program. THG will then bill directly.

Plans for Quality Assurance and promotion are described in detail later in this form. Funds for these activities will be submitted under the cost reimbursement portion of budget, as appropriate.

THG staff will attend all mandatory state trainings and will encourage two employees from each subcontractor to attend as well, in person or remotely. If subcontractors are unable to participate, THG staff will communicate the information to all sites in person or by teleconference.

THG will ensure compliance with reporting requirements by utilizing software to track the progress of all subcontractors. Providers will report monthly. THG will use these reports and billing records to track program activities. One Data Collection Clerk will be solely devoted to this program, using the software to track professional development activities, program promotion efforts, and number of patients served with types of services in order to complete required annual reports. In addition to annual requirements, this Clerk will provide internal monthly and semi-annual reports on: professional development activities, dates, number of staff; estimated number of patients served; efforts with community partners; promotion activities, with type of media presented and successes/challenges of these activities.

THG's service delivery area will include over 60 counties in the following Health and Human Services regions: Region 1, Region 2, Region 3, Region 4, Region 6, Region 7, Region 8, Region 11.

3. If an Applicant will subcontract any of the required (or optional) services, the Applicant must describe, in the space provided below how it will:
 - a. develop, negotiate, and administer the subcontracts;
 - b. provide training and technical assistance to subcontractors on all aspects of service delivery and administration;
 - c. monitor subcontractors' programmatic performance, including professional and clinical services; and
 - d. monitor subcontractors' quality assurance/quality improvement.

The Heidi Group (THG) will utilize the services of our certified HUB attorney, Donna Garcia Davidson, to develop, negotiate, and administer subcontracts with THG providers.

THG will encourage subcontractors to attend either in person or electronically all HHSC trainings. In addition, THG will use HHSC materials to train provider staff on all aspects of service delivery and administration. Initial two-day trainings will take place at each subcontractor clinic at the beginning of the contract cycle. This training will cover eligibility determination, the enrollment process, how billing and reimbursement work, and will clearly define the clinic's role in eligibility and enrollment. Additional training will be done quarterly, either onsite or through teleconferencing, by THG staff or outside groups. THG will offer monthly video conferencing for communication with subcontractors to answer questions and address any issues. If additional help is required, THG staff will personally visit subcontractors. THG staff will be on-call to providers for assistance in unexpected situations.

THG will monitor subcontractors' programs monthly by reviewing the billing under THG's TPI number. THG accounting staff will track contracting services by contractor as follows:

Subcontractors' program clinical allocation will be input into accounting/contracting software to track number of patients, services provided, reimbursement amounts, and other data requested by contract. Monthly, the accounts will be posted and assessed to determine subcontractor's performance toward the stated goals. Adjustments will be made as necessary. If the subcontractor is exceeding goals, reports will be shared with HHSC at six months, or earlier if necessary. If a subcontractor is serving fewer than projected, THG program staff will address to assist in meeting goals. Adjustments can be made within THG allocation if necessary.

Subcontractors' professional goals will be tracked by THG Quality Assurance staff and adjusted if necessary. THG staff will visit subcontractors on-site as necessary to maintain performance in accordance with contract.

THG will also perform quarterly onsite reviews and unannounced yearly audits.

THG will have a Quality Assurance (QA) committee as well as a Quality Assurance Specialist who will monitor subcontractors through monthly calls and reports from the provider's QA Committee. In case of a subcontractor adverse report, the subcontractor QA Committee will notify THG Medical Director and Program Clinical Director for evaluation of corrective action with changes to be made if necessary. THG QA staff will follow up with subcontractors until positive resolution of the issue is complete.

4. Applicants must provide in the space provided the following information related to its Family Planning Program promotion plan:

- a. a description of the Applicant's Family Planning Program promotion plan for the contract period July 1, 2016 through August 31, 2017;
- b. a description of the Applicant's implementation and evaluation strategy(ies); and
- c. a description of the Applicant's Family Planning Program promotion collaborative efforts carried out in conjunction with other health care providers or social service agencies in the proposed service area. Applicant must include a description of the

The Heidi Group (THG) will work with each subcontractor clinic to accomplish promotional activities in every county in our service area. THG will ensure current and past clients are contacted and informed of the Family Planning Program to assess the patient's eligibility for services. We will also ensure all clinics have a web and/or social media presence, and work with each clinic on search engine optimization and Google key word advertising for paid search ads. THG will also provide social media consulting and resources for subcontractors, offering customized posts twice weekly. For interested subcontractors, we will consult and assist with Twitter advertising as well.

THG has identified health fairs in each county of our service area and will work with subcontractors to ensure they have a presence at these fairs, providing materials and manpower as needed if clinics lack sufficient staff. THG will record public service announcements in English and Spanish, two 15-second and two 30-second, for television and radio in all counties.

THG will print and provide signs and brochures for distribution throughout each subcontractor's community with information on the Family Planning Program with customized clinic information. One common brochure will be created, with customized stickers added with the contact information of the nearest subcontractor clinic. Promotional materials will be provided to various locations around the community, such as Goodwill, Salvation Army, women's centers, pregnancy centers, WIC offices, Hispanic grocery stores, and school campuses. Printed materials will also include door hangers. THG will work with volunteers and community service groups to distribute door hangers to neighborhoods with high percentages of patients in the target population.

THG will provide evaluation cards to current patients along with materials they can pass on to others to encourage word-of-mouth referrals.

In some areas, THG will research the effectiveness of large-scale advertising such as billboards, bus ads, and ads in other public places. THG will distribute information about local Family Planning Program providers to college, trade school, and university campuses.

Subcontractor clinics who are already engaged in speaking at local schools, classes, community programs, and health fairs will be encouraged to continue. THG will assist with possible expansion of existing plans. For those not engaged in community education activities, THG will work to develop a plan and locate opportunities, and provide speakers if needed.

THG will establish an 800 number that will directly connect the caller to the nearest clinic. The 800 bill will show which subcontractor the caller was directed to and the length of the call which will allow THG to determine how many calls were received and how many ended with an eligible patient, served and billed.

THG will provide surveys and telephone flip charts to each subcontractor clinic that include the question "How did you hear about us?" to assess the most effective methods of outreach. We will also track the number of Family Planning Program clients seen at each clinic before and after outreach activities and assess the increase. Clinics will track existing clients' utilization of Family Planning Program services and number of visits per year.

outreach plan and strategies for marketing the program to the community.

5. Applicant must describe in the space provided how it will design, implement, and monitor Family Planning Program funds in order to ensure the provision of Family Planning and other support services to Clients throughout the duration of the contract.

The Heidi Group (THG) will design, implement, and monitor Family Planning Program funds according to the following methods that will lead to timely and accurate financial reporting and accountability through a staff that is thoroughly trained on contractual requirements and accounting standards.

Financial accounting is designed specifically around the level of funds managed, according to State of Texas mandated accounting principles set out in the Health and Human Services Contractor's Financial Procedures Manual.

THG's reporting structure and supporting chart of accounts and sub ledgers will accurately track the receipt of funds through segregated bank accounts for receipts and distributions as best practice for funds that require transparent reporting and easily-audited transfers of funds.

Requests for funds will be based on contract requirements through warrants presented with detailed accounting backup to be dually authorized by the CFO and Executive Director. Funds are to be received by wire transfer into a State of Texas chartered financial institution for safekeeping and distribution.

Distributions will be issued through an impressed zero-balance account at the same State of Texas chartered financial institution to clinics after requests for funds are approved by the bookkeeper responsible for gathering and the Executive Director on a timely basis. Distributions for expenses necessary for administration of program will be dually authorized by the CFO and Executive Director for transfer into operating bank accounts on a semi-monthly basis after review in open Finance Committee meetings of the CFO, Executive Director, and other accounting staff.

Bank accounts will be reconciled weekly to quickly identify any discrepancies in fund balances or receipts and distributions. Semi-monthly Finance Committee meetings will be held between the CFO, CEO, Executive Director, and accounting staff to review bank accounts and financial statements. Financial statements will be prepared and reviewed on both cash and accrual basis in the form of a Statement of Fund Balance, Statement of Activities, and Statement of Cash Flow.

All financial records will be maintained at the location of The Heidi Group and will be available for public inspection and independent audit. All necessary State of Texas reporting will be timely-filed and dually authorized by the CFO and Executive Director.

6. Applicant must describe in the space provided its internal Quality Assurance/Quality Improvement management and processes utilized to monitor services provided under the contract resulting from this open enrollment.

The Heidi Group and all subcontractor providers will use internal QA/QI management and processes to monitor Family Planning Services. The Heidi Group's (THG) Quality Assurance (QA) committee will be supervised by the Medical Director, and will include the Program Clinical Director, the Quality Assurance Specialist, and the Compliance Specialist. Additionally, each subcontractor will develop a QA Committee consisting of the Medical Director, key medical providers, nursing staff, medical technician/lab tech, and office manager to hold monthly meetings to address issues, adverse reports, and correction plans.

THG will conduct an initial on-site audit to assess procedures and then provide two-day, on-site staff training to each subcontractor. Training will correct non-conformance procedures and allow corrective actions. On-site quarterly audits will continue assessment until the program is implemented to THG QA standards. THG will provide a written QA manual which will include mandatory procedures, operational procedures, and auditing tools. THG QA trainers will select and train internal auditors in each subcontractor office with the goal of internal management review of processes. Providers will submit monthly reports, and THG staff will perform on-site auditing on a quarterly basis until systems are well established and then move to unannounced annual audits.

Each subcontractor Medical Director will develop protocols and standing delegation orders for that facility. Monthly, the supervising physician will review 25% of patient charts. The supervising physician will report potential areas for improvement to the QA Committee. The QA Committee will gather, analyze, and report feedback to the Medical Director monthly. The QA Committee will utilize adverse outcome reports to develop improvement measures and change protocols if necessary.

The QA system will document the structure, responsibilities, and procedures required to achieve effective quality management and delivery of services. Processes will be established to monitor services, and to identify staff responsible for ensuring that identified processes are implemented and documented including the role of the QA Committee for each subcontractor facility. The subcontractor Medical Director and QA team will internally develop activities to identify areas in need of improvement, activities to ensure correction, and follow-up to ascertain correction.

THG will establish specific, well-defined goals for program delivery. Goals will be regularly evaluated and measured for effectiveness. Program progress measurements allow QA Committees to measure various areas of the project, managers and teams including front office, medical, and billing. Obstacles are identified as well as methods to avoid negative outcomes and improve on identified issues. The measurement process defines how the programs flow.

THG and each subcontractor – external and internal teams – along with key personnel must agree that goals established by the measurement phase are realistic. Risks and opportunities for improvement should be identified to determine potential changes in the measuring phase.

Utilization of client satisfaction surveys will be a major part of the system to identify and monitor adverse outcomes. Patients will be given an anonymous client satisfaction survey at each visit. Patient satisfaction forms will be placed strategically around each facility to enable anonymous reporting. Subcontractor management teams will immediately address any concerns or complaints.

7. Provide a copy of the current and valid Texas medical license for the Medical Director that will oversee Applicant's provision of Family Planning Services;
8. Provide resumes for the following key employees:
 - a. Medical Director;
 - b. Program Director;
 - c. Clinical Director/Supervisor.
9. Applicants must fill out all the Program Forms and Contract Forms identified in Section 5.9 of this open enrollment.

FORM D: FAMILY PLANNING PROGRAM CONTACT PERSON INFORMATION

Legal Business Name: The Heidi Group

- This form provides information about the appropriate contacts in the Applicant's organization.
- Mark N/A if a contact does not apply to your agency.
- ALL phone numbers should be a direct line to the designated individual.
- If any of the following information changes during the term of the contract, please send written notification to the program.

Contacts			
<i>Billing Contact</i>		<i>Executive Director</i>	
Last Name:	Everett	Last Name:	Everett
First Name:	Carol	First Name:	Carol
Salutation:		Salutation:	
Title:	CEO/Executive Director	Title:	CEO/Executive Director
Email:	ce@heidigroup.org	Email:	ce@heidigroup.org
Phone:	512-255-2088	Phone:	512-255-2088
<i>Financial Director</i>		<i>Medical Director</i>	
Last Name:	Anderson	Last Name:	Johnson
First Name:	J. Dwayne	First Name:	Noreen
Salutation:	Mr.	Salutation:	Dr.
Title:	CFO	Title:	Medical Doctor
Email:	jdanderson@jdacpal.com	Email:	nzjohnson@hotmail.com
Phone:	512-481-9506	Phone:	979-764-4031
<i>Primary Program Contact</i>		<i>Quality Assurance Contact</i>	
Last Name:	Everett	Last Name:	Mayo-Day
First Name:	Carol	First Name:	Trina
Salutation:		Salutation:	Mrs.
Title:	CEO/Executive Director	Title:	Program Director
Email:	ce@heidigroup.org	Email:	trina@heidigroup.org
Phone:	512-255-2088	Phone:	512-255-2088

Program Director and Acting Clinical Director/Supervisor Resume

Trina L. Mayo-Day

Trina L. Mayo-Day, PHR

(864) 567-8150 • tmayoday@gmail.com • linkedin.com/in/trinamayodayphr/

HR Business Partner and Client Services Project Manager

Dynamic, natural leader with proven success whether facing internal or external customers. Driven to achieve excellence with integrity, tenacity, resourcefulness, adaptability, and courage. Exceptional communicator of complex materials garnering support of stakeholders for expedient and efficient project completion. Key skills include:

Process Improvement
Policies / Procedures
Benefits Administration
Human Resources
Employee Relations

Project Management
Change Champion
Implementation
New Hire Orientations
Recruitment/Staffing

Multicultural Relations
Employee Training / Coaching
Diversity Management
Leadership Development
Organizational Needs Assessment

Professional Experience

The Boon Group Austin, TX (July 2016 to March 2017)

Manager-Client Implementation Dept July 2016 to Mar 2017

Lead team of 9 Implementation Managers (IM), both technical and logistical in nature. Create policies and procedures for department. Lead extremely complex client implementation projects as necessary. Install new IM training program. The Manager provides the organization with business, process and technical analysis in support of carrier and client needs.

- Created a 6 week onboarding training program for Implementation Managers
- Formed policies and procedures governing the department both from a task and technical implementation standpoint
- Conducted needs analysis for numerous multi-departmental projects to successfully navigate benefits open enrollment season and move forward the strategic plan for the department

Implementation Manager (Jan 2015 to July 2016)

Responsible for managing implementation processes, projects. Work closely with internal departments, brokers, external clients, vendors, and carriers. IM manages implementation projects of groups, government (SCA and DBA contracts) and commercial driving project team efforts and results to meet deliverables and timeline expectations. Proficient in fostering client-facing relationships to complete a successful benefit plan implementation. Knowledgeable in leading self-funded and fully insured benefit plan projects of varying complexities. Educated in Living Wage and Ordinance requirement benefit offerings.

- Successfully implemented benefit plan projects for over 121K lives across the US, Puerto Rico, and Guam
- Designed and executed StrengthsFinder training for the organization.
- Recognized three times by Supervisors as being a team player and leader

Worksite Communications (A Div. of Gallagher Benefits) Miami, FL (2014)

Field Operations Supervisor (Contract position)

Create and execute mandatory open enrollment logistics for client (Jackson Memorial Hospital Systems) with 9800+ employees. Train and manage 35 Benefits Specialists in client benefits offerings and benefits provider proprietary software usage. Successfully troubleshoot all computer and other hardware challenges.

- Achieved 93% participation rate during open enrollment.
- Deemed the most successful problem free enrollment in company history by the client and JHS.

Fikes Companies, Temple, TX (2013 to 2014)

HR Business Partner-Develop a strategic business partner relationship with four business units to provide guidance and counsel on associate relations, human resources practices, talent acquisition, workforce planning, performance management, training, talent review, and other talent management needs. Consult with business unit management in the strategic planning process and development of HR strategies that support the business needs.

- Developed and revised over 75% of job descriptions for exempt and non-exempt employees across disciplines and business units in order to bring organizations into compliance.
- Partnered with Training Department to create and deliver leadership curriculum (Leadership Institute) for identified High Potential employees. The program has made a cultural impact on leadership; both formal and informal.
- Established relationships with military and veteran entities to launch concentrated military recruiting efforts. Expanded knowledge base of non-military teammates on effective targeting and interviewing of military applicants to fulfill our promise of American military veteran support. Impact has been an increased understanding of military to civilian skills translation amongst hiring managers resulting in better hires.
- Revised New Hire Orientation process and Onboarding procedures for four business units in an effort to gain new hire buy-in, reduce learning curves and turnover.

AECOM/ACFIRST, Southern Afghanistan (2012-2013)**HR Generalist III—Employment/Staffing, Personnel In/Out Processing**

Prepared job postings and reviewed applications for completeness and accuracy. Organized and executed New Hire orientation meetings for EXPATS and OCNs. Provided exemplary customer service to all levels of management and employees in multi-national environment. Served as ACT FOR HR Supervisor. Recognized for Employee of the Month as a HR Business Partner.

- Authored and executed 14 HR effectively communicating with over 40 nationalities. Achieved 98% pass rate and higher employee engagement and morale.
- Developed work instructions and "Smart Book" for each HR position in effort to reduce learning curves of Incoming HR personnel and maintain level of service to employees.
- Created and executed hands-on annual open enrollment project encompassing 27 locations across southern Afghanistan. Delivered open enrollment information for over 2700 US and International expats through in-person, teleconference, and video conferencing methods. Program resulted in higher employee morale, higher employee participation and engagement. Project was completed 6 days ahead of schedule.

Training Manager/Leadership Trainer

Managed and coordinated all mandatory and elective training across disciplines for a multi-national workforce of 2700. Required to serve as ACT FOR Training Supervisor. Created and implemented robust training communications program. Recognized for Employee of the Month as Training Manager/Leadership Trainer

- Recommended procedures for yet untested position (Training Coordinator). Systematized trainer schedules streamlining logistical processes. Improved trainer morale and cross-departmental communication and understanding of training program.
- Instituted multi-faceted communications program with all levels of management regarding new mandatory and elective training program. Efforts resulted in higher employee engagement and reduced "no shows" to classes.
- Co-authored and lead the 4-day Leadership Training Workshop for 515 Leads, Supervisors, and Managers across 27 Forward Operating Bases (FOB's) in SW Afghanistan resulting in higher productivity and employee morale.

Hewitt, Coleman & Associates, Inc., Greenville, SC (2010-2011)**Business Development & Retention, Group Health Division**

Expands business opportunities by building and maintaining client and broker relationships. Implements constant contact client awareness and resource campaigns. Streamlines office procedures and writes policies and procedures for Group Health division. Establishes self as subject matter expert by writing industry articles related to human resources and health reform issues. Fosters successful business relationships with brokers, vendors, and self-funded employer clients. Creates and implements sales presentation.

- Analyzed client benefits programs for the opportunity of cost cutting measures, higher employee engagement and potentially lower claims experience. Resulted in higher client retention and an uptick in business of 10%. Evaluated client employee handbooks and Summary Plan Descriptions then proposed required health reform compliance. High-touch approach increased customer satisfaction and retention.

Worksite Communications (Division of Gallagher Benefit Services), Tallahassee, FL (2005-2010)**Benefits Specialist and Case Manager**

Provided one-to-one benefits consultations to Client's employees. Managed and trained 51 benefits counselors. Managed international benefits call center. Consulted with client Senior Management for Wellness Plan and Benefits design.

- Designed logistical project plans for implementation of client benefits open enrollment programs. Created processes designed to streamline implementation, thereby cutting costs, while still providing high touch customer service.
- Encouraged and instructed multi-generational workforce of benefits specialists regarding client benefit offerings, records maintenance, open enrollment, and insurance carrier product specifics for each client case nationwide. Created turnkey training process in order to save time and costs.
- Worked with client Senior HR staff and company leaders to evaluate situations and problem solve on the spot considering multiple interests in the process under inflexible strict timelines. Effectively utilized and troubleshoot HRIS and third party vendor benefits and enrollment software.

Education & Certifications

Masters of Science, Human Resources, Tarleton University (Exp. Grad December 2017)

B.S.B., Human Resources, University of Phoenix

Professional of Human Resources (PHR), Villanova University and Human Resource Certification Institute (HRCI)

General Industry Health and Safety (30 Hour Certification), OSHA

Volunteer Experience

Boon Group Leadership & Advisory Council (2016-2017)

Central Texas Human Resource Management Association (CTHRMA) Board Member, Secretary/Treasurer (2014)

Heart of a Fighter Board Member, Secretary/Treasurer (2014 to Current)

Austin Pets Alive!, dog walker Texas Humane Heroes, kennel cleaner

CAROL EVERETT

109 South Harris, Suite 210 | Round Rock, Texas | ce@heidigroup.org | (512) 255-2088

EXECUTIVE MANAGER

Strategic Planning | Founding and Building Non-Profits | Growing Medical Practices

Highly qualified executive manager offering more than 25 years' experience establishing, managing, and growing medical practices and nonprofits. A results-focused and effectual leader with proven ability to develop organizations to levels of high productivity and efficiency. Talent for proactively identifying marketing trends, identifying and resolving problems, reversing negative trends, controlling costs, and maximizing productivity.

The Heidi Group: Founder and Chief Executive Officer | Round Rock, Texas | 1995-Present

The Heidi Group was founded to build a network of non-profit women's resource centers across Texas and to date is directly responsible for establishing 60 new centers. The Heidi Group identifies and works with individuals who build committees to found local women's resource centers in unserved areas. From there, work includes putting together a board of directors, strategic planning, application for 501(c)(3) nonprofit status, fundraising, and site selection.

- Hire, develop, and train new employees in board-driven policies and procedures, training community volunteers, client recruitment and serving clients
- Strategic planning of goals and objectives of The Heidi Group and newly established nonprofits
- Direction and leadership toward achievement of the organization's mission, strategy, program efficiency and annual goals and objectives
- Organizational development and fundraising
- Oversight of marketing, promotion, delivery and quality of programs, and services
- Leadership in community relations
- Provide strategic planning assistance to Boards of Directors of other nonprofits serving at-risk females

Life Network, Inc.: Founder | 1983-1995

Founded Life Network to assist nonprofit women's resource centers with administrative development and implementation. Responsibilities included:

- Organizational development and fundraising
- Facilitating Board of Directors strategic planning meetings to implement business, development, and marketing plans for small nonprofits
- One-on-one fundraising
- On-call consulting regarding business plans and fundraising

Dallas Women's Medical Clinic & Mesquite Women's Clinic: Executive Director | Dallas | 1980-1983

Contracted to build the business of the day surgery clinic. Increased monthly clinic procedures from 45 per month to 545 per month. Responsibilities included supervising 31 physicians and staff, overseeing daily clinic operations, quality assurance and quality improvement, marketing, and patient recruitment.

North Dallas Women's Clinic, Dallas and Southlake Women's Clinic | Fort Worth | 1977-1980

Served as Executive Director to manage Dallas day surgery clinic and book appointments for Dallas and Southlake clinics. Helped establish plan for future growth. Productivity more than doubled in first four months, from under 200 patients to over 400 monthly.

5/11/2017

Welcome to the TMB Website



PUBLIC VERIFICATION / PHYSICIAN PROFILE

PHYSICIAN

NAME: NOREEN ZENITA JOHNSON MD

DATE: 05/11/2017

THE INFORMATION IN THIS BOX HAS BEEN VERIFIED
BY THE TEXAS MEDICAL BOARD

Date of Birth: [REDACTED]

License Number: G1054 Full Medical License

Issuance Date: 12/01/1981

Expiration Date of Physician's Registration Permit: 08/31/2018

Registration Status: ACTIVE

Registration Date: 09/30/1999

Disciplinary Status: NONE

Disciplinary Date: NONE

Licensure Status: NONE

Licensure Date: NONE

Medical School of Graduation:

At the time of licensure, TMB verified the physician's graduation from medical school as follows:
HOWARD UNIV COLLEGE OF MEDICINE, WASHINGTON

Medical School Graduation Year: 1977

TMB Filings, Actions and License Restrictions

The Texas Medical Board has the following board actions against this physician. (This may include any formal complaints filed by TMB, as well as petitions and/or responses related to licensure contested matters, at the State Office of Administrative Hearings.)

NONE

Investigations by TMB of Medical Malpractice

Section 164.201 of the Act requires that: the board review information relating to a physician against whom three or more malpractice claims have been reported within a five year period. Based on these reviews, the following investigations were conducted with the listed resolutions.

NONE

5/11/2017

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Status History

Status history contains entries for any updates to the individual's registration, licensure or disciplinary status types (beginning with 1/1/78, when the board's records were first automated). Entries are in reverse chronological order; new entries of each type supersede the previous entry of that same type. These records do not display status type. Should you have any questions, please contact our Customer Information Center at 512-305-7030 or verificic@tmb.state.tx.us

Status Code: AC**Effective Date:** 09/30/1999**Description:** ACTIVE**Status Code:** CTL**Effective Date:** 09/01/1999**Description:** CME TEMPORARY LICENSE**Status Code:** AC**Effective Date:** 12/01/1981**Description:** ACTIVE

**THE INFORMATION IN THIS BOX WAS REPORTED BY THE LICENSEE AND
HAS NOT BEEN VERIFIED BY THE TEXAS MEDICAL BOARD**

Gender: FEMALE***Ethnicity:** BLACK**Race:** BLACK OR AFRICAN AMERICAN

* We are in the process of transitioning from the current ethnic origin values to federal standards for race and Hispanic origin. The transition period will allow time for individuals to submit updated race and Hispanic origin data to the TMB.

Place of Birth: TRINIDAD AND TOBAGO**Current Primary Practice Address:**

4112 E 29TH STREET

BRYAN, TX 77802

Years of Active Practice in the U.S. or Canada:

The physician reports that he/she has actively practiced medicine in the United States or Canada for **31** year(s).

Years of Active Practice in Texas:

The physician reports that, of the above years he/she has actively practiced in the State of Texas for **27** year(s).

Specialty Board Certification

The physician reports that he/she holds the following specialty certifications issued by a board that is a member of the American Board of Medical Specialties or the Bureau of Osteopathic Specialists:

NONE

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Primary Specialty

The physician reports his/her primary practice is in the area of OBSTETRICS AND GYNECOLOGY.

Secondary Specialty

The physician did not report a secondary practice area.

Name, Location and Graduation Date of All Medical Schools Attended

Name: HOWARD UNIVERSITY

Location: WASH DC/USA

Graduation Date: 06/1977

Graduate Medical Education In The United States Or Canada

Program Name: MLK/DREW

Location: LOS ANGELES, CA

Begin Date: 07/1977

Type: INTERNSHIP

End Date: 06/1981

Specialty: OBG

Program Name: NONE

Location: LOS ANGELES, CA

Begin Date: 07/1977

Type: RESIDENCY

End Date: 06/1981

Specialty: OBG

Hospital Privileges

The physician reports that he/she has hospital privileges in the following in the State of Texas:

Hospital: COLLEGE STATION MEDICAL CENTER

Location: COLLEGE STATION

Hospital: THE PHYSICIAN CENTRE

Location: BRYAN

Utilization Review

The physician did not report whether he/she provides utilization review.

NONE REPORTED

Patient Services

Accessibility: The physician reports that the patient service area is accessible to

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Welcome to the TMB Website

persons with disabilities as defined by federal law.

Language Translation Services: The physician did not report whether he/she provided any language translation services for patients.

Medicaid Participant: The physician reports that he/she **does** participate in the Medicaid program.

Awards, Honors, Publications and Academic Appointments

Optional Information

The physician may optionally report descriptions of up to five such honors and has reported the following:

Description: TEXAS A&M COLLEGE OF MEDICINE-CLINICAL ASSISTANT PROFESSOR

Malpractice Information

Section 154.006(b)(16) of the Act requires that: a physician profile display a description of any medical malpractice claim against the physician, not including a description of any offers by the physician to settle the claim, for which the physician was found liable, a jury awarded monetary damages to the claimant, and the award has been determined to be final and not subject to further appeal. The physician has the following reportable claims.

Description: NONE

Criminal History

Self-Reported Criminal Offenses: The physician is required to report a description of (1) "any conviction for an offense constituting a felony, a Class A or Class B misdemeanor, or a Class C misdemeanor involving moral turpitude" and (2) "any charges reported to the board to which the physician has pleaded no contest, for which the physician is the subject of deferred adjudication or pretrial diversion, or in which sufficient facts of guilt were found and the matter was continued by a court of competent jurisdiction."

The physician has reported the following:

Description: NONE

Criminal history information is also obtained by TMB from the Texas Department of Public Safety. Resulting action, if any, will be reported under the TMB Action and Non-Disciplinary Restrictions section above.

Disciplinary Actions By Other State Medical Boards

The physician has reported the following:

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Description: NONE

Physician Assistant Supervision

To obtain
primary
source
verifications,
click name

Description: NONE

Advanced Practice Nurse Delegation

To obtain
primary
source
verifications,
click name

Description: NONE

Summary of all License/Permit Types

Issue Date:

12/01/1981

Type:

LICENSED PHYSICIAN

[Contact Us](#) | [Privacy Policy](#) | [Accessibility Policy](#) | [Compact with Texans](#) | [Website Linking Policy](#)

Please contact Pre-Licensure, Registration and Consumer Services at (512) 305-7030 for assistance.

Family Planning Program 529-16-0102

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FORM E: FAMILY PLANNING PROGRAM FUNDING REQUEST & PROPOSED NUMBER OF UNDUPLICATED CLIENTS

Legal Business Name: The Heidi Group

Family Planning Program contractors may seek reimbursement for project costs using the following methods:

- A. Contractors will be reimbursed using the Fee-For-Service reimbursement method by submitting claims to TMHP for direct clinical care services provided to Clients, which will then be paid by HHSC; and
- B. Contractors may seek cost reimbursement for services that enhance the Fee-For-Service services provided to Clients by submitting monthly vouchers for expenses detailed in the categorical budget attached to a contractor's contract.

NOTE: Applicants may request up to 100% of their total funding request to be reimbursed through the Fee-For-Service reimbursement method or Applicants may request a portion of their funding request to be reimbursed on a cost reimbursement basis in addition to the Fee-For-Service reimbursement method. However, the cost reimbursement amount requested may not exceed 50% of Applicant's total proposed funding request and ultimately, its funding award.

Enter the amount of funds requested in the boxes below:

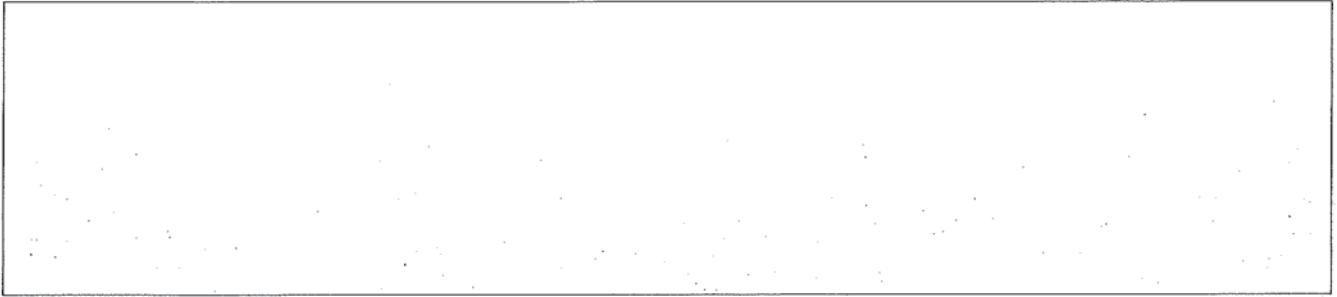
Fee-for-Service Amount	500,000
Cost Reimbursement Amount	496,930
Total Amount	996,930

The number of Unduplicated Clients an Applicant intends to serve through the Family Planning Program will be used to assess, in part, the Applicant's effectiveness in providing the proposed services under the contract resulting from this open enrollment. This number is the estimated total number of Unduplicated Clients to whom the Applicant will provide services at the proposed clinic sites. This total should be an estimate of the number of Unduplicated Clients the Applicant proposes to serve at the Family Planning Program clinic sites included in its application. Use the following average cost per Client OR submit an explanation of the average used by the agency: **\$285.00.**

Enter the estimated number of Unduplicated Clients to be served during the term of the contract, categorized by State Fiscal Year in the table below.

Period of Time	Proposed Number of Unduplicated Clients
July 1, 2016 – August 31, 2016 -- FY'16	0
September 1, 2016 – August 31, 2017 -- FY'17	3,498
Total Number	3,498

Applicants must provide an explanation/justification if the average cost per Client exceeds the statewide average of \$285.

A large, empty rectangular box with a thin black border, intended for applicants to provide an explanation or justification if the average cost per client exceeds the statewide average of \$285.

Attachment C – Contractor's Revised Budget Documents

FORM F: BUDGET SUMMARY (REQUIRED)

Legal Business Name:

The Heidi Group - FY17 FPP Budget Reduction Amendment - rev-8.4.17

Budget Categories	Total Family Planning Program Budget (1)	HHSC Share Categorical & FFS (2)	Patient Co-Pays To Be Collected (3)
A. Personnel	\$338,026	\$338,026	
B. Fringe Benefits	\$67,605	\$67,605	
C. Travel	\$21,918	\$21,918	
D. Equipment	\$14,200	\$14,200	
E. Supplies	\$85,655	\$85,655	
F. Contractual	\$353,046	\$353,046	
G. Other	\$116,480	\$116,480	
H. Total Direct Costs	\$996,930	\$996,930	\$0
I. Indirect Costs	\$0		
J. Total (Sum of H and I)	\$996,930	\$996,930	\$0

NOTE: The "Total Budget" amount for each Budget Category will have to be entered manually among columns 2 and 3. Enter amounts in **whole dollars**. After amounts have been entered for each funding source, verify that the "Distribution Total" below equals the respective amount under the "Total Budget" from column (1).

	Budget Category	Distribution Total	Budget Total	Budget Category	Distribution Total	Budget Total
Check Totals For:	Personnel	\$338,026	\$338,026	Fringe Benefits	\$67,605	\$67,605
	Travel	\$21,918	\$21,918	Equipment	\$14,200	\$14,200
	Supplies	\$85,655	\$85,655	Contractual	\$353,046	\$353,046
	Other	\$116,480	\$116,480	Indirect Costs	\$0	\$0

TOTAL FOR:	Distribution Totals	\$996,930	Budget Total	\$996,930
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FORM F-1: PERSONNEL Budget Category Detail Form

Legal Business Name:

The Heidi Group - FY17 FPP Budget Reduction Amendment - rev-8.4.17

PERSONNEL		Vacant Y/N	Justification	FTE's	Certification or License (Enter NA if not required)	Total Average Monthly Salary/Wage	Number of Months	Salary/Wages Requested for Project
Functional Title + Code	E = Existing or P = Proposed							
CEO		N	THG OFFICE	1	NA	\$5,324.00	13	\$69,212
CFO		N	THG OFFICE	0.5	CPA	\$2,500.00	9	\$11,250
Medical Director		N	THG OFFICE	1	M.D.	\$8,971.00	5	\$44,855
Program Director		N	THG OFFICE	1	NA	\$5,743.00	6	\$34,458
Billing Clerk		N	THG OFFICE	5	NA	\$2,691.00	1	\$13,455
Marketing/Media Director		N	THG OFFICE	1	NA	\$2,622.00	4	\$9,177
Providers		N	Provider Offices	21	MD, NP, PA	\$4,164.00	1	\$87,444
Medical Assistants		N	Provider Offices	21	MA	\$2,497.00	1	\$52,437
Eligibility Clerk		N	THG OFFICE	1	NA	\$2,623.00	6	\$15,738
								\$0
								\$0
								\$0
								\$0
TOTAL FROM PERSONNEL SUPPLEMENTAL BUDGET SHEETS								\$0
Salary/Wage Total								\$338,026

FRINGE BENEFITS

Itemize the elements of fringe benefits in the space below:

[illegible]

FORM F-2: TRAVEL Budget Category Detail Form

Legal Business Name:

The Heidi Group - FY17 FPP Budget Reduction Amendment - rev-8.4.17

Conference / Workshop Travel Costs		Justification	Location City/State	Number of: Days/Employees	Travel Costs	
Description of Conference/Workshop						
Acting Clinical Program Director and CEO/Executive Director travel to 23 provider sites	Family Planning Program Training for Providers and Staff; detailed training for front desk and eligibility staff	Tyler, Jacksonville, Athens, San Antonio, Jourdanton, Desoto, Arlington, Ft Worth, Bryan, Marble Falls, Conroe	6/2	Mileage	\$8,086	
				Airfare	\$2,500	
				Meals	\$5,857	
				Lodging	\$5,475	
				Other Costs		
				Total	\$21,918	
		Amarillo, Garland, Terrell, Mineral Wells	6/2	Mileage		
				Airfare		
				Meals		
				Lodging		
				Other Costs		
				Total	\$0	
		Alamo, Edinburg, La Joya, McAllen,	6/2	Mileage		
				Airfare		
				Meals		
				Lodging		
				Other Costs		
				Total	\$0	
				Mileage		
				Airfare		
				Meals		
				Lodging		
				Other Costs		
				Total	\$0	
					Total	\$0

\$21,918

Other / Local Travel Costs					
Justification	Number of Miles	Mileage Reimbursement Rate	Mileage Cost (a)	Other Costs (b)	Total (a) + (b)
			\$0		\$0
			\$0		\$0
			\$0		\$0
			\$0		\$0
			\$0		\$0
			\$0		\$0
			\$0		\$0
TOTAL FROM TRAVEL SUPPLEMENTAL OTHER/LOCAL TRAVEL COSTS BUDGET SHEETS					\$0

\$

\$

\$21,918

\$21,918

Indicate Policy Used:

Applicant's Travel Policy ☐

State of Texas Travel Policy ☐

The Heidi Group - FY17 FPP Budget Reduction Amendment - rev-8.4.17

Description of Item [If applicable, provide estimated quantity and cost (i.e. # of boxes & cost/box)]	Purpose & Justification	Total Cost
Printer	THG Office	\$642
It Supplies & Office 365	THG Office	\$1,495
Workstations	THG Office	\$93
Copies & Office Supplies	THG and Provider Offices	\$83,425
TOTAL FROM SUPPLIES SUPPLEMENTAL BUDGET SHEETS		\$0

\$85,655

The Heidi Group - FY17 FPP Budget Reduction Amendment - rev-8.4.17

CONTRACTOR NAME (Agency or Individual)	DESCRIPTION OF SERVICES (Scope of Work)	Justification	METHOD OF PAYMENT (i.e., Monthly, Hourly, Unit, Lump Sum)	# of Months, Hours, Units, etc.	RATE OF PAYMENT (i.e., hourly rate, unit rate, lump sum amount)
Labs and Pharmacies	Patients, Lab Tests and Rx's	Provider's Directions	Monthly	3,498	5.70
Provider Supplies	Provider Supplies	Provider Supplies for exam rooms, IUD's, Billing Office Supplies	Monthly	3498	\$94.25
Provider Class D Pharmacy Applications	Class D Pharmacy Applications	Class D Pharmacy Applications	Lump Sum	6	\$570.00
TOTAL FROM CONTRACTUAL SUPPLEMENTAL BUDGET SHEETS					

Revised: 7/6/2009

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nitractors as "To Be

TOTAL
\$19,939
\$329,687
\$3,420
\$0
\$0
\$0
\$0
\$0
\$0
\$0
\$0

\$353,046

The Heidi Group - FY17 FPP Budget Reduction Amendment - rev-8.4.17

\$116,480

Total Amount Requested for Other: